TULARE COUNTY'S EPSDT PIP JOURNEY

Initial Review

The Tulare County EPDST PIP team members examined the original file sent by the State and defined the following categories as exclusion criteria for PIP cohort members: July 2007 – June 2008, n=268

Exclusion	Rationale
Closed cases	No intervention could be monitored given that status
Never	Consumer's case was never opened, i.e., out of county case, or no treatment
opened	was begun in the County for other, documentable, reasons
cases	
Age ≥ 21	Inability to apply long-term intervention to 21 year old cases before the PIP
	terminated, or before funding ceased
	EPSDT funding exclusion for ages 22+
Death	Self-explanatory
Only one	On a case-by-case basis, a review of a sole instance of a claim ≥ \$3,000. If the
month of	case was no longer Medi-cal eligible, then the consumer was excluded from the
claims ≥	cohort as claims would no longer applicable for this funding pool
\$3,000	

Youth-related mental health consumer considerations:

Healthy Families

AB3632 (Also Medi-Cal funded)

Out of County

Large percentage of high users that are not Medi-cal

Is this a representative sample, given that it crosses age ranges, income levels, etc.?

Variations with the service population and providers in terms of:

- Referrals and subsequent treatment
- Types of and subjectivity in diagnostic tools
- Groupings by diagnoses and disability
- of Types of services received
- cs Inpatient prevention efforts
- Scale of services
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 Scale of services
- cs Confounding factors, e.g., service delivery by the mere factor of service provision at particular sites
- Rural vs. urban access effects

A priori exclusions

At the onset of State data file review, the following exclusions were made due to:

Exclusion type	n
Closed cases	40
Never opened case	1
Age	3
Death	1

EPSDT PIP Data Analysis – Select Variables

Age Data Descriptive Statistics & Frequencies

Age in 2008	N	Minimum Maximum		Mean	Std. Deviation
	223	4	20	13.13	3.599

Age in 2008	Age	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	4	1	.4	.4	.4
	5	1	.4	.4	.9
	6	5	2.2	2.2	3.1
	7	11	4.9	4.9	8.1
	8	13	5.8	5.8	13.9
	9	8	3.6	3.6	17.5
	10	18	8.0	8.1	25.6
	11	19	8.4	8.5	34.1
	12	11	4.9	4.9	39.0
Teenage	13	27	12.0	12.1	51.1
Years	14	18	8.0	8.1	59.2
	15	24	10.7	10.8	70.0
	16	25	11.1	11.2	81.2
	17	20	8.9	9.0	90.1
	18	9	4.0	4.0	94.2
	19	10	4.4	4.5	98.7
	20	3	1.3	1.3	100.0
	Total	223	99.1	100.0	

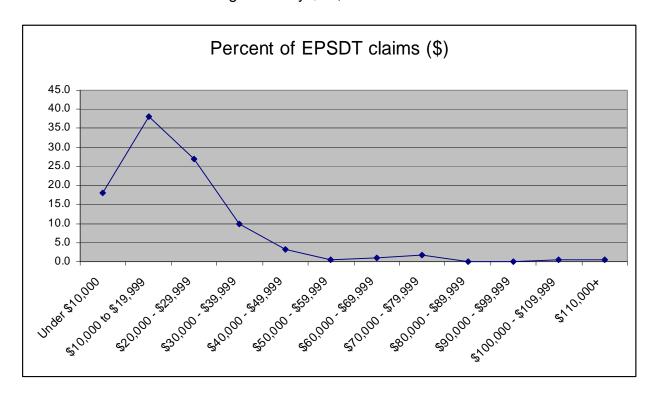
Data considerations for all consumer intervention applicability

- Recognize that data are skewed *a priori* (Medi-cal data excludes many Health Families children would reflect an earlier group)
- C3 Latency age population
- Treatment modalities in adolescence, traditionally one of the hardest populations to treat

Cumulative Claims data

Cumulative Claims (\$)	N	Minimum	Maximum	Mean	Std. Deviation
	223	\$3,412	\$127,170	\$21.567.98	\$15,747.275

Cumulative Claims data distinguished by \$10,000 increments



Average Claims data

Average Claims	N	Minimum	Maximum	Mean	Std. Deviation
	223	\$227.00	\$8.478.00	\$1.437.87	\$1,049.82332

Decisions for final dataset

- 1. Include all EPSDT consumers based on cohort exclusion criteria
- 2. Include AB3632 consumers

Variables to harvest/monitor for further decision making

Cost data: monthly averages, total cost, cost by service and location

Rural vs. urban

Demographic variables such as age, gender, race, ethnicity, primary language CVRC eligibility

Out of home placement, foster care,

History of probation/jail (600 PROBATION /300 CWS)

Location of treatment codes

Services provided

Axis I – primary Axis I – secondary GAF Boarding care

Sources to guide EPSDT Roadmap process

Children's Service Network – Report Card CIMH/CIMHDA Websites APS Unclaimed billing data Best practices literature for interventions